

Kentucky Department for Medicaid Services

Drug Review Options

The following chart lists the agenda items scheduled for review at the January 15, 2004, meeting of the Pharmacy and Therapeutics Advisory Committee and options that were submitted for review.

Item	Options for Consideration
Insulin Therapeutic Class Review	<ol style="list-style-type: none">1. All human insulin is equivalent, and one brand should be preferred.2. Require PA for pen-delivery systems for patients who are unable to manipulate vials/syringes (eyesight, dexterity, comprehension).3. For any new chemical entity in the Insulin class require a PA and quantity limit until reviewed by the P&T Advisory Committee.
HMG-CoA Reductase Inhibitor Therapeutic Class Review	<ol style="list-style-type: none">1. The HMG-CoA Reductase Inhibitors are equivalent within their potency class.2. The HMG-CoA Reductase Inhibitors can be described in terms of their LDL cholesterol lowering potency as “potent” and “less potent”. The potent statins are rosuvastatin, atorvastatin and simvastatin. These agents also vary in cost to the Medicaid program. It is suggested that a minimum of two statins be selected as preferred based on net cost to the KY Medicaid program and that at least one of these preferred agents be in the “potent” category.3. Require a PA for the remaining non-preferred statins and require failure of, or a medical contraindication to the preferred agents.4. Retain a quantity limit of one tablet or capsule per day for all of the statins except for lovastatin 40mg.5. For any new chemical entity in the HMG-CoA reductase class require a PA and quantity limit of one tablet or capsule per day until reviewed by the P&T Advisory Committee.
Oral Hypoglycemic Agents Therapeutic Class Review	<ol style="list-style-type: none">1. When there is more than one branded product in a class (Miglitinides, Alpha-glucoside inhibitors, Glitazones) prefer one product over the others.2. For any new chemical entity in the Oral Hypoglycemic class require a PA and quantity limit of one tablet or capsule per day until reviewed by the P&T Advisory Committee.

The following terms will be utilized within the therapeutic monograph to classify medications during Drug Class Reviews. By using these terms, the reviewer will be able to easily identify any clinical differences between the medications within the class being reviewed.

Superior - Following evidence-based review, it is determined that the drug provides a therapeutic advantage, in terms of safety and/or efficacy, over other available products within the same treatment modality.

Novel - Following evidence-based review, the drug is therapeutically equivalent in both safety and efficacy, but represents a new therapeutic option, which expands the treatment modality.

Equivalent - Following evidence-based review, it is determined that the drug is therapeutically equivalent in both safety and efficacy to other available products within the same treatment modality.

Not Essential - Following evidence-based review, it is determined that the drug has no therapeutic advantage, due to either reduced safety or efficacy, over other available products within the same treatment modality.